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PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge) (37 CFR 1.16 (e)) required	Attorney Docket Number		014033-000013		
	First Named Inventor		Kurt Newman		
	COMPLETE IF KNOWN				
	Application				
	Filing Date				
	Group Art Unit				
Examiner Name					

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND SYSTEM TO APPLY TREATMENTS TO DIFFERENT CHANNELS

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by and amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02/B attached hereto:

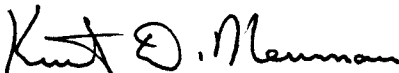
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DECLARATION – Utility or Design Patent ApplicationDirect all correspondence to: ☒ Customer Number **24,239** OR ☐ Correspondence address below
Or Bar Code Label**Name** **Moore & Van Allen PLLC****Address** **2200 West Main Street, Suite 800****City** **Durham****State** **NC****ZIP** **27705****Country** **US****Telephone** **(919) 286-8000****Fax** **(919) 286-8199**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:☐ A petition has been filed for this unsigned inventor**Given Name**
(first and middle [if any]) **Kurt****Family Name**
Or Surname **Newman****Inventor's**
Signature**Date** **9/15/2003****Residence: City** **Matthews****State** **North Carolina****Country** **US****Citizenship** **US****Mailing Address** **1537 Wickerby Court****City** **Matthews, North Carolina****State** **N.C.****ZIP** **28105****Country** **United States****NAME OF SECOND INVENTOR:**☐ A petition has been filed for this unsigned inventor**Given Name**
(first and middle [if any])**Family Name**
Or Surname**Inventor's**
Signature**Date****Residence: City****State****Country****Citizenship****Mailing Address****City****State****ZIP****Country**☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02S attached hereto